Application or Docket Number												nber	
	PATENT	APPLICAT											
Effective December 29, 1999 69/678/75													
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY OTHER THAN TYPE OR SMALL ENTITY					
F	FOR NUMBER FILED NUMBER EXTRA							RATE	FEE	٦	RATE	FEE	
B	BASIC FEE					,			345.00	OR		690.00	
ř	OTAL CLAIMS	2	,	minus 20⇒		. 8		X\$ 9=		OR		144.00	
	DEPENDENT C		4 minus 3 =		. 1			X39=		OR	X78=	78.00	
MULTIPLE DEPENDENT CLAIM PRESENT								+130=	1			10.80	
"If the difference in column 1 is less than zero, enter "0" in column 2							<b>'</b> [	TOTAL		IOR		0.0	
CLAIMS AS AMENDED - PART II								TOIAL		JOR	TOTAL	91200	
	(Column 1) (Column 2) (Column 3)							SMALL	ENTITY	OR	SMALL		
MTA	CC	CLAIMS REMAINING AFTER AMENDMEN		PH	HIGHEST NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL		RATE	ADDI- TIONAL	
MENDMENT	Total	36	Minus		34	٠ ـــ		X\$ 9=	FEE	OP.	2818=	FEE	
3	independent	. 6	Minus	1		•		X39=		OR	X78=		
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							. 120					
								+130=		OR	+260=		
	•	(Column 1)		40	N. 1 01	<b>49.4</b> as	Ą	DOIT. FEE		OR	ADDIT, FEE		
8		CLAIMS	1	1	Column 2) HIGHEST	(Column 3)	8		ADDI-	1		ADDI-	
3		AFTER AMENOMENT		, PF	NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA		RATE	TIONAL		RATE	TIONAL FEE	
AMENDA	Total	$\cdot 3\varphi$	Minus	-	36	•		X\$ 9=		OR	X\$18=		
3	independent	· 6.	Minus	•••	6	₹	ľ	X39=		OR	X78=		
H	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							.400					
	( /							+130=	<b></b>	OR	+260⇒ 101/U		
	allalar						A	DOIT. FEE		OR	ADDIT. FEE		
- 9	<u> </u>	(Column 1)			Olumn 2)	(Column 3)	-				•		
EMT C	•	REMAINING AFTER AMENDMENT		PR	NUMBER EVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
AMENDWEN	Total	. 36	Minus		36_	=		X\$ 9⇒ ·		OR	X\$18=,	4	
E E	Independent	. 6	Minus	•••	6	• —	H	X39-			X78=		
Ш	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						-			OR		+	
١.,	! The entry in pobut	m i biess han	The entiry in colu	ann 2 :	write W in one	mn 3.	L	+130=		OR	+260=	$\mathbf{W}$	
	i the Highest Nut	nber Previously I	Paid For IN TH	is spa	CE is less than	20, enter 70."	AD	DIT. FEE	<u> </u>	OR A	TOTAL DOIT, FEE	7	
""If the "Fighest Number Previously Paid For" (Total or Instagement of the Inighest Number Previously Paid For" (Total or Instagement of the Inighest Number Previously Paid For" (Total or Instagement of the Inighest Number Issue appropriate box in column 1.													
	PTO475	4(7)	~				Paleri	and Trades	ork Office U.S	) DEP	RITMENT OF	COMMERCE	
147. [	(288) <b>/</b>	K I'II N				•							